



From a Pedagogy of Vulnerability to a Pedagogy of Resilience: A Case Study of the Youth and Gender in Media Project

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Abstract

Much media attention has recently focused on gender expansive students in schools. Whether arguing over bathroom rights or wardrobe freedoms, many educators feel caught in a crossfire between protecting their students and maintaining the status quo of an extremely binary educational system. After reviewing the history of the pathologization of gender expansiveness and the normalization of the gender binary, this study reveals the data from an examination of four workshops conducted by the Youth and Gender Media Project over the course of two years. The experiences of educators, mental health experts, healthcare providers, and primary caretakers of gender expansive individuals who participated in the workshops are described using qualitative methods. The findings underscore the need for introducing gender expansive and gender inclusive materials into curricula while expressing the frustration of those who feel that this is important, yet difficult. This article suggests that educators play a critical role in challenging the history of discrimination against gender expansive individuals and that their willingness to avail themselves of the material that currently exists is not merely a matter of taste, but a matter of social justice, of equity, and of proactively evolving the discourse of gender and its ideological implications in the classroom.

Keywords: *gender, gender expansiveness, Youth and Gender Media Project, LGBTQIA, education, vulnerability, resilience*

Addressing and helping to make schools more safe and inclusive for transgender and (a)gender youth, and for their peers to be part of helping to legitimate their lived experiences, school systems and all of their stakeholders, must step up immediately. If not, the consequences will be deleterious.

-s.j. Miller (2017)

Introduction

As exemplified by current media trends, the concept of gender expansiveness¹ seems finally to be coming to the fore, and rightfully so. Gender expansive individuals have suffered enormous injustices perpetrated against them by the very individuals who should, ostensibly, have their best interests in mind—educators. Moreover, educators often feel justified in their actions because of the way the gender binary has been normalized in popular culture and media while intersex, transgender, gender expansive individuals have been pathologized (Funk & Funk, 2016a), vilified, mocked, or dismissed (Jobe, 2013). This study examined the Youth and Gender Media Project (YGMP), an organization working with K16 educational systems to expand the concept of gender, to create safe educational spaces for students and teachers to live authentically, and to facilitate the discourse that may eliminate the need for such programs in the future. This study sought to describe what K16 educators (working in K12, higher education, and medical professional fields), therapists, and caretakers of gender expansive youth learned from a gender inclusivity workshop focused on creating gender inclusive spaces in schools.

Individuals working with gender expansive youth are in a critical position to offer support for youth who are statistically more likely than their cisgender² and heterosexual counterparts to experience discrimination. The Youth and Gender Media Project (YGMP) offers such support by harnessing the power of film to work with teachers, after school program administrators, and others overseeing youth educational programming to share methods of pedagogy and practices that help to develop more inclusive educational environments for all. The authors, an academic and a medical professional, having first-hand experience with transgender hatred in academia and in the medical and mental health fields, sought to design a study that would offer a comprehensive review the pathologization of gender expansive individuals in education and the medical and mental health fields while offering data that explore educators' perspectives in order to reduce violence against gender expansive students. As such, this article will review how gender expansive individuals have been made into a vulnerable population by mental health care providers, primary health care providers, and the American media landscape, all of which feed the culture of educational settings, which often reify the gender binary and reinforce the vulnerability of gender expansive students. It will then turn its focus to the Youth and Gender in Media Project to discover what educators are learning from it and offer educational best practices and recommendations for further research.

A Pedagogy of Vulnerability

Vulnerability Perpetuated by Mental Health Professionals

Created by the American Psychiatric Association (APA) in 1952, the Diagnostic and Statistical Manual of Mental Disorders (DSM), has been used as a manual, or “gold standard,” for

1. This term has been commonly used to describe individuals who are gender creative, gender fluid, gender-fuckers, genderqueer, transgender, or transsexual, so as not to conflate gender identity with sexuality. For more, see Sherer, Baum, Ehrensaft, & Rosenthal (2015).

2. The term “cisgender” is an adjective denoting the antonym of “transgender,” i.e. it describes someone living comfortably in the sex they were determined at birth and performing the socially constructed practices associated with gender most commonly portrayed as being in agreement with that sex marker. For more, see Klein (2008) Serano (2007), Pyne (2014), and Brydum (2015).

mental health professionals to create terminology and systems of classification for mental conditions. Although in 1973 homosexuality was declassified in the DSM as a mental disturbance, non-normative sexual desires (such as “transvestic fetishism” and “hypersexuality”) and gender expansiveness continue to be pathologized. This terminology and ideological positioning is critical to review and problematize as it influences contemporary educational policy. When mental health professionals pathologize a behavior or way of thinking, it sends ripple effects through the fabric of a society’s culture. Consequently, health professionals categorize gender expansive individuals as having a mental disorder in the same category as Obsessive Compulsive Disorder (ODC) or Agoraphobia, and stigmatize them as such. Thus, gender expansive individuals are seen by their educators, medical, and mental health providers as having a “problem,” and not treated from an unbiased perspective. The effects of this stigmatization are evident in media and education, two of the largest contemporary culture producers. A review of this stigmatization is critical to underscore the extent to which gender expansive students have suffered because of the normalization of the cisgender and heterosexual identity markers.

The first version of the DSM, or DSM-I, used the terms “homosexual,” “transsexual,” and “transvestite” to label people who did not identify within the culturally sanctioned definitions of heterosexuality and/or the gender binary. Homosexuality was defined as a “personality disorder” (APA, 1952, p. 13), which was lumped under “sexual deviations” and considered pathological. The DSM (APA, 1952) stated, “The diagnosis will specify the type of the pathologic behavior, such as homosexuality, transvestism, pedophilia, fetishism and sexual sadism (including rape, sexual assault, mutilation) (p. 39). The term “gender” was not used in the DSM-I, as there was neither a clinical nor a cultural distinction between sex and gender at that time. The APA’s conflation of homosexuality and gender expansiveness with pedophilia and sadism, however, has had dire consequences that lived long after the distinction between sex and gender became popularized. Today, these consequences are borne out through social normatives, legal systems, and medical practices that continue to stigmatize gender expansive individuals.

The pathologization of gender expansiveness led to privation for individuals constructing their identity outside of the binary of heteronormativity during the middle of the 20th century. They were dishonorably discharged from the U.S. military; they were fired from positions within the federal government under Eisenhower’s executive order 10450, which lasted from 1953 until 1993; they were generally discriminated against, and are still often blocked from procuring legal forms of identification (Milan, 2014) and using public restrooms (Ford, 2015). They are inevitably stripped of their basic human rights based solely on their gender identity. Although the APA (2013) has since ratified its stance on gender expansiveness, it continues to pathologize it by labeling gender expansive individuals as having the “condition” of “gender dysphoria” in its DSM-V. Medical professionals unfamiliar with gender expansive individuals will turn to the “gold standard” of treatment and see these individuals as mere “problems” to be dealt with, or as “exceptions” or “anomalies,” rather than treating them without this umbrella which often stigmatizes them and alters their treatment plan.

The DSM-III (APA, 1980) classified gender expansive people wishing to transition as having “Gender Identity Disorder” or “GID” rather than as being afflicted with “transsexualism.” Moreover, as opposed to being considered a Personality Disorder (among this section are schizophrenia, narcissism, and obsessive compulsive), GID was placed in the category of Sexual Disorders (among this section are pedophilia, voyeurism, and frotteurism). In 2013, the newest version, DSM-V, replaced GID with “Gender Dysphoria” (APA). The DSM-V has moved away from focusing on one’s personality or sexual identity as being disordered and focuses instead on

the psychological distress one may encounter prior to transitioning. Thus, although the semantics surrounding the “diagnosis” of gender expansiveness have seen a tremendous mutation over time, the mental health community has tenaciously held to the belief that every individual should identify *exclusively* as *either* male *or* female. Moreover, the preferred mode of being in this binary is a state in which one’s sex labeled by a medical doctor at one’s birth remains congruent with one’s gender identity throughout life, or cisgender. This gender policing perpetrated by professionals continues to stigmatize gender expansive individuals, thereby leaving some bullies feeling justified in their hatred of them. It is important to note that although heterosexism and xenophobia are both known contributing factors to the struggles gender expansive people often encounter, the APA has categorized neither as a mental or personality disorder or disturbance, or even a “condition”. The core of the issue should not be focusing on discerning what is “wrong” with a person who transitions or is gender expansive, but on discovering how one may transition, or adopt a non-binary gender identity, without psychological distress in the first place.

Vulnerability Perpetuated by Health Care Providers

In addition to the APA’s pathologization of gender expansive individuals, medical professionals have mistreated people who have not displayed behavior, sexual orientation, and genitalia deemed normative and binary. Suffering from the dearth of training regarding gender expansiveness, healthcare professionals may find their ideological frameworks buttressed by a system of policies (medical, political, and cultural) that reinforce the “abnormality” (as opposed to infrequency) of gender expansiveness.

The Institute of Medicine (2011) reports that gender expansive people face protracted opprobrium from physicians, dentists, nurses, pharmacists, and generally all health care practitioners. In *Findings of the National Transgender Discrimination Survey*, Haas, Rodgers, and Herman (2014) found that 27% of the study’s participants reported that their physicians had denied them care at least once due to their discomfort in caring for a gender expansive individual (p. 12). Additionally, 23% affirmed that they “have postponed or not tried to get needed medical care when [they were] sick or injured because of disrespect or discrimination from doctors or other health care providers” (Haas, et al., 2014, p. 12). This study concluded that more training of healthcare professionals is needed to provide gender expansive individuals the access to healthcare that cisgender individuals expect. “While many [healthcare] providers report high levels of discomfort with taking the sexual history of any patient, this lack of training exacerbates this discomfort when providers are dealing with LGBT patients” (Institute of Medicine, 2011). Medical forms require patients to identify as either male or female (the assumption being that natal birth markers predict gender expression). The gender binary pervades the medical health industry, as pharmacotherapeutic standards are then created according to false binary beliefs (Funk, Vanderhorst, & Funk, forthcoming). Thus, the cisgender condition is normalized for healthcare practitioners while gender expansiveness is pathologized, and requires extensive mental healthcare treatment prior to secondary sex characteristic modification, often at a hefty psychological and monetary cost (Brewster, Velez, Mennicke, & Tebbe, 2014; Jackson, 2015; Milan, 2014; World Professional Association for Transgender Health, 2011).

The pathologization of gender expansiveness by the American Medical Association (AMA) normalizes the stigmatization many parents of K12 students feel that gender expansiveness deserves. Physicians, though frequently aware of the spectrum of anatomy that the human condition expresses, are not immune to the socio-political ideological constructs of gender and

often, albeit unintentionally, create “barriers to accessing timely, culturally competent, medically appropriate, and respectful care” (Strousma, 2014, p.31). This pathologization is not merely fed to students in healthy doses by mental health and healthcare practitioners, but it is weaved into the fabric of popular culture through media.

Vulnerability Perpetuated by Media

Media representation of gender expansiveness is not only important for showing gender expansive people that they exist and that they matter, but also for exposing cisgender non-LGBTQIA people to what may be their first experience considering a non-binary gender identity. This exposure is critical to engender a change in political and educational policies.

As Battles and Hilton Morrows (2015) explain, the cisgender gaze, or the dominant perspective through which media narratives are told, is “powerful and disciplining” and often treats the transgender body as a “spectacle” (240). An analysis of *Queer as Folk*, *Will and Grace*, and *Queer Eye for the Straight Guy*, *RuPaul’s Drag Race*, and *Transparent* reveals that, despite the increase in media representation afforded gender expansive individuals, the rhetoric employed by media largely stigmatizes them as spectacles offered up to the cisgender imaginative (Funk & Funk, 2016b).

Indeed, media portrayals of gender expansive people typically focus on the physicality of one’s body, whether it is pre- or post-operative, on hormones, sexually/reproductively functional, male/female, etc. This cisgender fascination with the corporeal body legitimizes Athanasiou’s argument that “condescending forms of recognition...extend regulatory control over the intelligibility of subjects” (Butler & Athanasiou, 2013, p. 59). This fascination is also driving the profit of shows featuring gender expansive characters. As Shelley (2009) explains, gender expansive people have long been:

an exploitable group that conjures a fascinating gaze, a spectacle long in use in popular culture, for example, in television talk shows, circus sideshows, Hollywood cinema, magazines, and pornography...Their supposedly endowed powers of fascination can suddenly flip; they can quickly degenerate into a counter object of disgust, shame, and sinfulness, eliciting quick condemnation, unleashing chaos and threatening categories of predictability, order, and conformity to normalcy. (p. 388)

Thus, the cisgender gaze can at once mythologize the gender expansive body as exotic and worthy of special attention, or dehumanize that same body, thereby stripping it of its access to civil liberties.

While contemporary programs may have increased the visibility of LGBTQIA individuals, they have often done so through fabricating a narrative that normalizes cisgender homosexuals and exoticizes gender expansive individuals. In most popular American shows that aired between the late 20th and early 21st century, the sexuality of the gay characters is either repressed (*Will and Grace* and *Queer Eye for the Straight Guy*), or hyperbolized (*Glee*, *The L Word*, and *RuPaul’s Drag Race*). *Transparent* applies both conventions, rendering its main character void of sexuality in the first season, while focusing on her sexuality in the next. Thus, even though LGBTQIA characters seem to have garnered increased media representation, they have done so by being exoticized, rather than normalized. The impact of this media exposure on students is difficult to quantify; however, as the average American K12 student watches an estimated six

hours of television per day³ and (Nielsen, 2014) it can be estimated that, along with mental health and health care provider policies, media have a significant impact on students' and educators' attitudes and perceptions regarding gender.

Vulnerability Perpetuated in Educational Settings

The consequences of the pathologization of gender expansiveness in the medical and mental health fields and the media hypo/hyper sexualization of gender expansive individuals are palpable to gender expansive children. As medical and mental health issues are often publicized and sensationalized through media⁴, children arrive at their schools and after-school programs aware of the social codes dictating what a cisgender, heterosexual performance “should” look like (Patterson, 2012; Freeman, 2007). Children are indoctrinated before they can even enter the classroom door by being told to line up either in the “boy line” or the “girl line.” Thus, discovering methods being employed to make students and educators aware of the “gender spectrum” (GenderSpectrum.org, 2016) is increasingly important to reduce the stigmatization of and violence against gender expansive individuals by considering how educators, from K16 to professional schools, conceptualize gender.

Educators, mental health and health care professionals, often have limited exposure to information and/or training concerning gender, gender expansive students, and practices aimed at fostering gender inclusivity in educational settings. As Luhmann (1998) explains, the attempts to educate students regarding queer studies in queer studies classrooms can often be squashed by the cisgender, heterosexual, gender binary, gender normative majority: “Even in designated queer studies classrooms heterosexism and homophobia—and in this case internalized heterosexism and homophobia—re-emerge and threaten to overwhelm queer subjects” (p. 147). While Luhmann (1998) writes of the challenges to teach queer studies in higher educational settings, the challenges of addressing issues of sexuality and gender expression can seem significantly greater in K12 educational settings where students are less mature than college students and teachers often have less autonomy over curricula and content than do college professors.

Vulnerability Internalized in Gender Expansive Populations

A Centers for Disease Control and Prevention (CDC) (2011) study that examined risk behaviors in youth from 2001-2009 found that compared to their heterosexual and cisgender peers, non-heterosexual, transgender, and gender minority (terminology utilized by the study) students are disproportionately at risk for victimization, such as being threatened or injured with a weapon while on school property. So systemic is this discrimination that many gender expansive students struggle to find a restroom on any school campus that they could use without fear (Ingrey, 2012; Weiss, 2013). Approximately 29% of girls and 23% of boys display gender-atypical behavior (Sandberg D. E., Meyer-Bahlburg H. F., Ehrhardt A. A., & Yager, T.J., 1993) at some point during their childhood, and because gender expansive students may suffer at the hands of educators, parents, and peers due to their lack of “gender autonomy” (Weiss, 2013, p. 340) they are one of today's largest and most vulnerable student populations.

A full 55.5% of LGBT students recently studied described their school environments as unsafe due to verbal harassment, cyberbullying, and physical harassment (Kosciw, J.G., Greytak,

3. Also according to this study, one's media engagement time increases with age (Nielsen, 2014).

4. For a good example of gender stereotyping, see Caitlyn Jenner's transition media coverage.

E.A., Palmer, N.A., & Boesen, M.J., 2014). According to one study, which surveyed 3,652 middle, junior high, and secondary school educators from among 42 different school districts, only 7% of those districts' bullying policies contained language specifically aimed at preventing bullying against lesbian, gay, bisexual, transgender, and questioning (LGBTQ) students (Kolbert, J.B., Crothers, L.M., Bundick, M.J., Wells, D.S., Buzogen, J., Berbary, C., Simpson, J., & Senko, K., 2015).

Research indicates that gender expansive youth suffer discrimination that is two-fold. Firstly, as their atypical gender expression is misclassified as being indicative of homosexuality, they suffer from heterosexism, commonly called homophobia (Quinn, 2002). Secondly, they suffer discrimination on the basis of their non-normative gender presentation (HRW, 2001; Kosciw, 2008). Thus, the conflation of sexuality and gender identity predisposes school-aged children to additional layers of discrimination they may already experience vis-à-vis the intersectionality⁵ of their ethnicity, class, religion, and various markers that intersect within their identities.

Research Methodology and Design

This article describes the findings of a small-scale analysis of the Youth and Gender in Media Project (YGMP; youthandgendermediaproject.org). As the authors are involved in gender advocacy in educational and healthcare settings, they became increasingly more interested in knowing what is currently offered to educators to facilitate training on gender expansiveness, as well as in describing educators' perceptions of these trainings. Moreover, the authors wanted to examine a gender expansive curriculum currently in use to analyze to what extent it may be applicable to college classrooms and/or professional trainings. To these aims, the authors analyzed the results of a questionnaire designed by the YGMP.

Qualitative methods were used for this study to gather data that sought to describe workshop participants' meanings and to gain a rich understanding of the phenomenon under study (Creswell, 2007), while allowing for some flexibility in the design. The research participants were asked open-ended questions that tasked them to relate their personal experience of a documentary workshop.

Maxwell (2005) has delineated benefits of qualitative research that are relevant to this project. The first is that qualitative methods have the potential to "generat[e] results and theories that are understandable and experientially credible to both the people you are studying and to others" (p. 21). Secondly, Maxwell (2005) has highlighted how qualitative methods help to improve "existing practice rather than to simply assess the value of the program or product being evaluated" (p. 21). While this research project tasked participants to reflect upon their experiences thinking about gender identity in educational settings, the overarching goal was not to evaluate them, but instead to disseminate knowledge about their experiences considering how to make educational spaces more gender inclusive.

5. Intersectionality research has thus found gender and other identity markers to be mutually constitutive. That is, one identity marker is always filtered through one or more others. Therefore, it is critical to note when students may possess the traits of more than one identity marker that puts them at odds with social norms or standards (Rogers, Scott, & Way, 2015; Dottolo & Stewart, 2008; Ghavami & Peplau, 2013).

Study Participants: The Youth and Gender Media Project Workshop Attendees

Created and directed by Jonathan Skurnik, the Youth and Gender Media Project (YGMP) is a series of short films and accompanying study guides whose mission it is to promote inclusive schools and communities for all children, regardless of where they fall on the spectrum of gender identity and expression. The film *Creating Gender Inclusive Schools* documents the in-service teacher training done by Gender Spectrum at Peralta Elementary School in Oakland, California. It serves as a case study by showing key moments of the Gender Spectrum training, as well as interviews with Peralta Elementary students and parents. The film, *I'm Just Anneke*, tells the story of a gender-fluid 12-year-old labeled as a female at birth who starts Lupron (a hormone blocker) at the onset of puberty, to have the time to decide whether to medically transition to male. *Becoming Johanna* documents the struggles a 16-year-old transgender Latina experiences as she matures. In *The Family Journey*, families share their experiences of raising gender expansive children. As described by YGMP (2017), "Everybody wants to be loved unconditionally. But what do you do when your child tells you they're questioning their gender? *The Family Journey: Raising Gender Nonconforming Children* follows the journey of moms, dads and siblings of kids who are questioning whether they're a boy, a girl, or something in between" (YGMP, 2017).

Visiting educational settings, YGMP shares these films, along with accompanying study guides, to provide educators the tools with which they can foster gender inclusivity within their schools and organizations.

Workshop participants self-identified as educators, mental health providers, healthcare professionals, caregivers of gender expansive youth and allies of gender expansive youth. In 90 minute workshops (two in 2015 and two in 2016), participants viewed the YGMP documentaries. Participants were provided with hard-copy questionnaires that elicited their thoughts and feedback by asking open-ended questions about the extent to which the films challenged their thinking, about how they could see themselves using these films, and about the general lessons they learned from the films. Additionally, attendees were offered space to provide other thoughts and criticisms to help YGMP hone its future educational materials. Participants were offered the chance to discuss their thoughts with one another once the questionnaires were collected so that they could debrief about their experiences and build their professional networks.

Data Collection

The Gender Spectrum Conference, where these workshops were hosted, is an annual event held by the Gender Spectrum on the American west and east coasts where hundreds of gender expansive individuals and people interested in increasing social justice for them gather to attend presentations, involve themselves in workshops, and learn how to advocate for the spectrum of genders that exists. Among conference participants were educators, childcare providers, and medical and mental healthcare providers—all of whom care for, and/or educate gender expansive individuals.

The survey instrument was developed by YGMP as a tool to collect qualitative data to help the organization continue to create educational materials that had a positive impact on developing gender inclusivity in educational environments. The survey instrument was distributed to workshop attendees of the west coast conference during 2015 and 2016 and collected by YGMP. Out of the 81 total surveys distributed, 81 participants (38 in 2015 and 43 in 2016) responded (response rate = 100%). The survey asked participants open-ended questions about *Be-*

coming *Johanna*, *Creating Gender Inclusive Schools*, *I'm Just Anneke*, and *The Family Journey*, educational films directed and produced by Jonathan Skurnik of the YGMP, all of which have accompanying educational materials also developed by YGMP. Descriptive statistics on participants are not included in this analysis, as the participant pool was small, and participants were promised complete anonymity. Each participant was 18 years-old or over, and none was compensated.

Credibility and Data Analysis

To increase credibility for this study, Lincoln and Guba's (1985) guidelines of credibility, transferability, dependability, and confirmability were implemented. Participants' questionnaire answers were typed verbatim and confidentially by interns employed by YGMP. Any potential identity markers were removed and the raw data were then shared with the study researchers for analysis. The data were then entered into a spreadsheet, coded, and analyzed by the researchers according to the principles of grounded theory.

The researchers analyzed the data in three steps according to the coding process of horizontalization (Moustakas, 1994). First, the researchers read and coded the data thematically by assigning emergent codes colors. Second, the researchers compared their coding systems and terms, looking for similar themes that could be merged, i.e. one researcher coded a theme as "difficulty of implementing," while the other coded the same quotes as "challenging to incorporate." The researchers discussed the nuances of the words "difficult"/"challenging" and "implement/incorporate" and decided upon theme colors to repeat the coding process together. During the second phase of analysis, the researchers narrowed long quotes down to smaller units of meaning (comments, phrases, and terse quotes) that illustrated examples of each theme. The emerging themes were then analyzed between the two researchers, who had an inter-rater reliability rate of 95%.

Peer checks with colleagues in higher education were conducted to increase credibility and dependability (Cresswell, 2007). As the authors were interested in discovering a theory emerging from the workshop participants, no hypotheses were created. Instead, the voices emerging from the qualitative data revealed common themes, which guided the authors to describe the participants' experiences of thinking about gender expansiveness and gender inclusive education.

Limitations

The participants attending the Gender Spectrum Conferences in 2015 and 2016 represent a population predisposed to furthering social justice for people of marginalized gender identity and presentation. As such, none of their answers reflected adversity to gender expansiveness, or the kind of animus against gender expansive, intersex, or transgender students so common among school campuses today. Additionally, the YGMP intern who typed the questionnaire responses in 2016 was different than the one who did so in 2015. The data were cross-checked both years, however, by Jonathan Skurnik, the YGMP director, and confirmed to be accurate. *Becoming Johanna* depicts the story of a transgender Latina, and touches upon issues of racial/ethnic/religious/class intersectionality. *Creating Gender Inclusive Schools* displays a wide range of ethnic identities among educators and students (most of whom identify as working class). While YGMP depicts an assortment of religious, ethnic, and class identities in its films,

future research may seek to better explicate how various facets of identity construction and intersectionality inform educational practices and policies regarding the spectrum of gender.

Findings

The four themes that emerged during the data analysis are:

- 1) All participants stated that gender inclusive education is needed in the curriculum;
- 2) of the participants, the majority stated that adults should be learning from children how to create gender inclusive spaces;
- 3) about one-third of the participants remarked that that creating a gender inclusive curriculum is doable; and,
- 4) about one-third of the participants remarked that this curriculum (YGMP) will be challenging to incorporate into the existing curricular model.

The themes that emerged from the data analysis reflect the workshop participants' thoughts, with commonalities identified across their responses. The themes also reflect how the need for gender inclusivity is prevalent among educators, childcare providers, and clinicians. Thus, the common theme iterated by participants was that gender inclusivity is needed in the curriculum and possible to instantiate, despite some apparent obstacles.

Gender Inclusivity is Needed in the Curriculum

In response to the question, "Who needs this [gender inclusivity training]?" all of the participants discussed the need for introducing this material into educational curricula. One elementary school teacher explained, "This is sorely lacking in our curriculum." Another educational administrative emphasized that this is needed throughout "elementary schools and district offices." As these data indicate, participants vented their frustration not only about the curriculum lacking gender inclusivity materials, but also about school administrators having minimal knowledge of gender spectrum language and training.

One participant speculated that the "district is unaware of the benefits of training." Another participant, emphasizing the need for gender inclusivity training both at the teacher and district level, wrote, "I would purchase a copy to share with my staff and at district administration meetings." Another echoed this sentiment, adding, "It would be fabulous for all districts to have a link to th[ese] films on their websites." Another who saw the need for it and offered to pay out of pocket asked, "When can we get it?" Seven participants were very specific about where the curriculum was needed and mentioned specific school districts and states, the names of which were omitted to protect participant anonymity. Interestingly, two educators mentioned the need for this curriculum at LGBT centers and within LGBT-focused academic programs, places that are often considered to be proactive and progressive regarding matters of social justice and gender. Thus, gender inclusivity training was also expressed as lacking in settings that may be seen traditionally as being gender inclusive.

Six participants (three working in education, two in mental health, and one in the medical field), expressed that gender inclusivity training was needed because of urgent safety reasons. One of them wrote that the YGMP curriculum “Cuts to the heart of issues of gender and address[es] a MAJOR [participant’s emphasis] theme of peer bullying and harassment.” Another called the materials “The definitive truth that teaching about gender in the classroom is imperative to creating safe space for all students.” Another said the materials are needed at “My kids’ school so they can have a safe environment growing up. So, I don’t have to do all the work myself.” While participants discussed the need for gender inclusive training and curricular material, they also indicated that the best instructors might be the students themselves.

Let the Kids Be the Teachers

The questionnaire provided a space labeled “Other Thoughts” and a space to name their “Favorite” part of the workshop and film. There, participants shared reactions to the films, thoughts on how to achieve greater gender inclusivity, and challenges to achieving greater inclusivity in educational settings. The data consistently revealed that participants viewed the top-down approach to teaching gender inclusivity as flawed. The majority of participants commented that educators and care providers should be learning about the gender spectrum from their own children, students, and patients. One healthcare provider responded that they were inspired by “seeing how excited the kids were to talk about it [gender]! They want to!” An educator wrote that their own students and those in the films “continually teach me and remind me that they are more open minded than we think.” A common sentiment was expressed by a medical provider, saying, “The kids’ interviews were beautiful - if we could just let them teach us - it would be perfect.” One educational administrator, who had previously written that the district level employees needed gender inclusivity education clarified why: “You have to educate the adults. They will lead the way and influence for the better. The kids are so advanced in comparison.” This notion that adults need gender inclusive education more than do children was reiterated by participants who critiqued the current educational system’s (non)reaction to gender inclusivity while expressing hope for a more equitable future.

Participants frequently praised the children in the films for their progressiveness: “The kids’ insight and clarity gives you so much hope for this kind of work working.” Other participants, who said that there is a need for gender inclusive curricular materials at the district level, also critiqued the pedagogy of the K12 school system, with one expressing, “We don’t get to listen enough to what kids say” and, “Seeing the children’s perspectives was valuable. Their [points of view] are often neglected.” One post-secondary educator envisioned how the gender inclusive materials could give teachers the chance to “flip” the classroom not through technology, but through “giving the teachers the chance to learn from kids using provided lessons.” A mental health provider wrote, “I keep thinking of the kids, because they just get it.” Finally, one participant’s comment summarized this theme by declaring, “The kids are amazing teachers!”

Gender Inclusivity in Schools is Doable

The third emergent theme was also identified among the data shared by participants in the “Other Comments” section. After viewing the films and discussing their application in educational settings, one third of participants viewed gender inclusive trainings in schools as “doable.” It is possible that more believed this to be true and did not mention it, given the circumstances

(these questionnaires were distributed at a venue where attendees are predisposed to assume change is possible). Of those participants who mentioned that gender inclusive education is doable, the majority did so while simultaneously offering a critique of the current dominant educational ideology. For example, K12 teachers expressed, “It is really not as hard as people might think.” Another wrote, “It can be done with education. It’s not as overwhelming as it seems.” One post-secondary educator wrote, “I couldn’t really picture how to do it [before]. Seeing this makes me feel hopeful, like we can try to do this everywhere.” Another participant simply stated that it is, “not that hard, after all.” Finally, this theme is summarized by two participants, who unknowingly echoed one another’s sentiments by writing, “Where there’s a will, there’s a way” and “It feels doable!”

Challenging to Incorporate into Education

The number of participants who believe gender inclusivity still to be challenging to incorporate into education, despite viewing the films and discussing the curricula, was nearly equal to that of those who believed it to be “doable.” These data were coded from the questionnaire sections entitled “Critiques” and “Other Comments.” While one third of participants remarked that integrating these would be “doable”, another third described the process as challenging. One K12 teacher elaborated on the topic by writing, “that it is possible, but probably not realistic.” This sentiment was echoed by a care provider who wrote, “My experience with schools has been a lack of interest to request education. Even resentment of having to deal with the issue.” While some participants left the root of the challenges (trans hatred/trans apathy, funding issues) up to speculation, a few offered more information as to why they saw the gender inclusivity curriculum as challenging to incorporate.

Of the challenges, one educator wrote, “The end credits should include RESOURCES [participant emphasis], because lots of teachers and schools actually do have the will [to include gender inclusive curricular materials], but don’t have good resources.” Another described the challenge of doing this work while clearly being in the minority among colleagues: “How does one educator, or a pair of educators, affect cultural change at a school site?” Thus, it is significant to note that no participant described students’ ideological frameworks as challenges. The common thread among all who wrote about the challenges of including a gender inclusive curriculum in school addressed the challenges of confronting the systemic gender binarism in our culture, and, as one participant wrote, “even resentment of having to deal with the issue.”

Discussion

The four emergent themes underscored the need for gender inclusivity in educational settings, challenged the current pedagogical model of adults teaching *to* children, and accurately portrayed the conflicting views about teaching gender inclusivity in educational settings today. The need for gender inclusivity in the curriculum is evidenced through the rampant and relentless bullying directed at transgender, gender expansive students, and those perceived to be transgender and/or gender expansive.

According to a 2011 study conducted by the National Center of Transgender Equality, 82% of transgender youth feel unsafe at school; 67% have been bullied by classmates online; 64% have had their property stolen or destroyed at school; and 44% have been physically abused at school (Grant J.M., Mottett, L.A., Tanis, J.T., Harrison, J. Herman, J.L., & Kiesling, M.). Sur-

prisingly, this is happening during the same decade GLAAD (formerly the Gay & Lesbian Alliance Against Defamation) called the “trans ‘media moment,’ exclaiming “public awareness of the transgender community is swiftly on the rise” (2014, p.4). Visibility alone never promotes social justice. Unless educators have the tools to “question media, challenge hegemony, and participate in society as justice-oriented global citizens” (Funk, Kellner, & Share, 2016, p.23), visibility alone may only serve to reproduce the dominant cisgender perspective, which typically stigmatizes and/or fetishizes the gender expansive.

As noted by workshop participants, the children (kindergarteners through high schoolers) in the YGMP films were receptive to discussing gender as a spectrum, gender as a performance, and gender as something that is not a fixed identity marker. The workshop participants found themselves identifying with educators in the films who approached the gender inclusion lessons with trepidation. As participants watched the educators’ fears subside because of the children’s openness, they too realized that the fear and loathing directed at so many gender expansive people by students may only be a reflection of adult stigmatization and not a “natural” reaction among children. Thus, before educators make themselves receptive to learning about the spectrum of gender alongside their students, they need to inquire into their own personal positionality (Frederick, Cave, & Perencevich, 2010; Sleeter, Torres, & Laughlin (2004); Ladson-Billings, 1999). That is, they need to take a critical inventory of their various identity markers and account for how each one positions them to see “where they stand in relation to ‘the other’ (Merriam, Lee, Lee, Ntseane, & Muhamad, 2001, p. 411). Having acknowledged their positionalities and biases during gender inclusivity training, the teachers in the YGMP films were equipped to engage in a dialogue *with* their students, and learn *from* their students, rather to talk *at* their students.

In *Considering Transgender People in Education*, Rands (2009) proposes a teacher education model called “Gender-Complex Education” (p. 427). Rands (2009) explains that before educators enact gender-complex education, they must “interrogate their own thinking about gender” (p. 427). As this study’s workshop participants’ comments reveal, the YGMP films helped them to begin to interrogate their thinking.

If educators and others working with gender expansive youth seek to transform the normative discourse surrounding gender, they must first recognize that “by not challenging gender oppression, the educational system is doing all students a disservice because all students are in danger of incurring punishments for crossing gender lines” (Rands, 2009, p. 429). As young children have undergone significantly less gender grooming than have their older counterparts, children are often positioned to discuss gender freely and to teach adults how to reconceptualize it. This study’s participants saw the freedom with which children discussed gender in the YGMP films and recognized the importance of infusing a curriculum with openness to gender expansion.

As noted by the participants, the debate as to whether educators should address gender, gender oppression, or gender expansiveness is fierce. The participants viewing a gender inclusive curriculum as “doable” or “challenging” were virtually split down the middle. Indeed, gender’s place in any educational setting in the United States is highly contested. Much of the current Common Core is written in a manner that reinforces gender-free or gender-blind education that was adroitly critiqued by Houston (1985):

Having claimed to have treated girls and boys equally in the classroom, they [teachers] are shocked to discover through objective observation measures that they spend over two thirds of their time with boys who comprise less than half of the class. (p. 366)

This gender-free or gender-blind pedagogy, one that allows educators to pretend gender is not influencing their teaching, simply permits the cycle of gender oppression and gender rigidity to reproduce itself while privileging children who conform to the binary and punishing those who do not. Thus, teachers who refuse to challenge the gender binary in their classrooms may inadvertently send a message through their silence that they also do not oppose gender identity-based bullying. Moreover, educators in post-secondary institutions and professional programs that are training future medical and mental healthcare providers are in a critical position to instantiate positive change for a more gender-equitable society.

In “Opening the Door to Transgender Care”, Callahan (2015) warns that:

Perhaps most importantly, the cultural rejection of children and adults who exhibit cross-gender behavior and/or appearance has permeated the health care environment...It is unknown how many trans patients have stopped seeking care because of their experience at the hands of primary care providers, but it is clear that there is a need for quality improvement in care for trans patients. (p. 706)

This need for quality improvement is exemplified in the current number of American medical schools requiring MD candidates to take a course on gender or LGBTQIA+ topics: one. The University of Louisville School of Medicine adopted a required component in their 2016–2017 curriculum that addresses the unique healthcare concerns of LGBTQIA+ individuals (U of L School of Medicine); however, the vast majority of nurses, pharmacists, and physicians have not had LGBTQIA+ topics covered comprehensively during any of their professional schooling.

The paucity of training on LGBTQIA+ topics in post-secondary institutions training medical providers normalizes the silence around discrimination against gender expansive individuals and protects those who use gender identity to ignore important health concerns of the gender expansive. As of this study’s publication date, only one American medical school incorporates a comprehensive LGBT training into its curriculum (University of Louisville, 2016). A recent Twitter project dubbed what is known as the “Trans Broken Arm Syndrome” to illustrate this point (O’Hara, 2015). Transgender participants in the Twitter project shared accounts of medical visits in which healthcare providers blamed “health issues ranging from panic attacks to stomach flu were due to their hormones or transgender status” (O’Hara, 2015). Essentially, their lack of training may make practitioners feel justified in ignoring the health concerns of gender expansive people, and in handing them off to mental health care providers instead because “gender dysphoria” remains a diagnosis in the DSM-V (APA, 2013). In “Transgender Patients: Providing Sensitive Care,” medical providers are urged to “refer patients to a mental health provider with experience in treating this patient population” (Hyderi, Angel, Madison, Perry & Hagshenas, 2016, p. 450). Moreover, the “sensitive care” outlined in the article refers solely to the management of hormone therapy and the use of “preferred” pronouns, as if the pronouns used by cisgender individuals are, in any way mandatory instead of preferred. To date, no research has been conducted on how hormone therapy affects anything other than secondary sex characteristics in transgender individuals. Thus, medical practitioners are left to their discretion

when deciding how to dose medications or interpret laboratory results of individuals on hormone therapy to transition in gender identity.

Because the belief that gender expansiveness is due to mental pathology, and because this is still reinforced by the APA, the education that mental health care providers receive regarding gender merely reinforces the pathologization of gender expansiveness. Thus, the gender expansive patient moves from their primary care provider, who typically knows little to nothing about gender expansiveness, to a mental health care provider who has been trained to “help” people conform to one side of the gender binary, the marker they were assigned at birth being optimal.

The participants in this study confirmed what is becoming evident globally. Young people want to expand gender, want to talk about gender, and are some of the most well-qualified to dispel myths about the gender binary because the binary indoctrination process has affected them for fewer years than it has adults. Put simply, many young people do not consider the gender binary something worth preserving. Globally, this sentiment is becoming a groundswell.

Eleven countries currently give their citizens the right to declare their own gender, regardless of anatomy, and to update their legal documents accordingly and expediently (Macarow, 2015). A recent National Geographic special issue, “Gender Revolution,” defined nine different genders for readers (2017, p. 10-11). Scholars in the U.S. are also beginning to challenge the gender binary in medicine and current medical privacy practices regarding gender expansive patients (Funk, Vanderhorst, & Funk, forthcoming). The participants of this study accurately predicted that our notions of gender must expand as soon as possible to prevent more murders, suicides, and violent acts from occurring everywhere, not the least of which, our schools.

A recent survey revealed that 82% of transgender youth feel unsafe at their high schools (National Center for Transgender Equality, 2011). It is difficult to fathom what the public response would be if the same were true for cisgender students. According to another survey analyzing post-secondary campus climates, gender expansive students were seven times more likely than their gender-conforming peers to experience harassment due to their identities (Rankin, Weber, Blumenfeld & Frazer, 2010). Clearly, an epidemic of gender binarism is adversely affecting students nationwide, yet few schools, whether K12 or post-secondary, have incorporated gender inclusive curricula or practices into to pedagogies in any substantive manner.

Conclusions: Moving from a Pedagogy of Vulnerability to a Pedagogy of Resilience

Bullying, in its most common and insidious form, “naturalizes” a certain mode of acting, looking, thinking, and performing gender. While some believe bullying stems from unawareness, Whitlock (2010) argues that it does not stem from naïve ignorance; rather, “Bullying is a violent, visible social production of the normative order” (p. 99). The binary gender system is an ideological construct that serves to protect power and privilege through creating a false sense of normalcy for those who fit into its categories. As does the membership to any dominant cultural order, such as whiteness, Protestantism, or wealth, so too can a sense of belonging to the gender binary prevent one from seeing the often violent repercussions of not belonging. Yet, it is this very sense of unbelonging that should be explored with all students.

Unfortunately, much of the literature addressing gender expansiveness does so by addressing trans*+ individuals as vulnerable individuals facing increased risks of sexually transmit-

ted diseases (Stieglitz, 2010), and fraught with “mental illness and biological maladies” (Dirks, 2016, p. 374). In short, the sense of unbelonging expressed by many gender expansive individuals is seldom regarded as a positive characteristic. It is this sense of unbelonging, however, that can create a tremendous resilience in students, provided that they have strong support networks to affirm their identities and guide them through the inevitable trepidation that accompanies being gender expansive in hetero-cis-normative educational institutions in the U.S. Moreover, as Singh, Meng, and Hanson (2014) suggest, educators might benefit greatly from reflecting upon their own gender identities, most of which have been normalized, but constructed nonetheless:

To understand the gender-affirming process that the participants described, counselors should reflect on their own personal journeys of resilience related to their gender identity so that they develop more awareness about the role of gender identity in their own lives. For instance, counselors may reflect on the societal messages that either made them feel empowered or disempowered about their gender identity. (216)

Everyone has a gender identity and journeys through a process of self-discovery to define that identity, yet for many cisgender individuals, the process might not be one upon which they reflect because of the normalization of the gender binary. As we strive to provide more equitable treatment to students, we must challenge the gender binary and its use in education.

In order to create a more tolerant and equitable society, we need to incorporate LGBTQIA themes into the curriculum for primary, secondary, and post-secondary students. Moreover, we need to ensure that LGBTQIA students are reaching their full academic potential, rather than performing at levels below their potential because of the stress of LGBTQIA discrimination (Rankin, 2005). Educators must take an active stance to reduce discrimination toward LGBTQIA students:

For example, allowing faculty in the social sciences to teach classes on diversity and tolerance to students in other disciplines, inviting LGBT[QIA] students and community leaders to classrooms across the campus to speak about their experiences, and even mandating tolerance programs as a part of the early socialization of incoming students might prove beneficial to the overall LGBT[QIA] campus climate. (Holland, Matthews, & Schott, 2013, p. 17)

The documentaries produced by YGMP, along with their accompanying curricula, could be a critical catalyst to conversations about such initiatives.

As urged by Smith and Payne (2016), it is time for educators and people who provide support for LGBTQ individuals to “[push] back against curriculum and institutional practices that tell queer kids they do not belong” (p. 46). While it is important to decrease bullying against gender expansive youth in schools, it is equally, if not more, important, to confront the systems that create the ideological framework that justify the bullying and microaggressions in the first place. School climates often encourage the bullying and microaggressions through their tacit acceptance and reification of the gender binary:

When school climates support and privilege the normalization of heterosexist, cisgender, Eurocentric, unidimensional (i.e., non-intersectional), or gender-normative beliefs—even

unconsciously- it forces students who fall outside of those dominant identifiers to focus on simple survival rather than on success and fulfillment in school. (Miller, 2016, p. 3)

Thus, conducting professional developments and workshops to decrease discrimination is not enough. Educators and caretakers must begin to reconceptualize gender if they seek not merely to save lives, but to enrich lives.

Educators, particularly those teaching future therapists, medical care providers and psychologists, need training at all levels of schooling and during their medical practice in order to begin to treat individuals fairly, rather than to consider the gender expansive to have a disorder. Likewise, teachers working in primary and secondary settings need training during their schooling, student teaching, and professional development, so that they come to view their gender expansive students as typical individuals expressing the spectrum of gender identity. When caretakers and educators acknowledge gender as a spectrum and engage in critical conversations about gender, the stigma surrounding gender expansiveness will decrease.

By incorporating documentaries and curricular material such as those produced by YGMP, educators serving K through professional school students could help eliminate the binary gender essentialism that has helped to spawn this violent reality for gender expansive youth. Programs such as YGMP need to be integrated into the K12 curriculum not merely when schools realize they have transgender or gender expansive youth in their schools. We have seen the damage of a reactive curriculum, one designed to teach “tolerance,” as if supporting gender expansiveness could be likened to tolerating a blister. As these workshop participants voiced, a gender inclusive curriculum is needed now, and children are often the best teachers. The need exists; kids are ready to teach adults what the future of gender looks like; however, the free-spirited gender expansive child will not remain as such if their ideas are consistently squelched by dogmatic educators and healthcare providers using the gender binary to police them or to defend their own sexism and discriminatory beliefs.

As these workshop participants voiced, seeing children discuss gender, and working through a curriculum that tasked them to evaluate their own presumptions about gender critically, demonstrated to participants that educational institutions can weave gender expansive education into their curricula. As the gender binary is being challenged around the world, and as scientific evidence continues to disrupt the binary (Vanderhorst, 2015; Funk, Vanderhorst, & Funk, forthcoming) those of us who work in education, from K through post-secondary and professional schools, need to actively seek curricular material that will help us break down the gender binarism that has for too long created and reinforced a pedagogy of vulnerability. A pedagogy of resilience requires that we do our utmost to create safe space in our classrooms.

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Appendix: Thematically Coded Raw Data

Gender inclusivity is needed in the curriculum. The following participant answers have been selected from the survey to demonstrate the trend in answers to the question, “Who need this [YGMP] curriculum?”

K12 educators. This is sorely lacking in our curriculum.
School principals.
Every school district on[sic] the state of XXXXX.
Elementary schools wanting to do this work and having parents along.
Elementary schools – destruct [sic] offices.
Teachers, administrators, and parents.
I hope this kind of thing becomes mainstream. If we teach young kids to think about gender differently, it could change the game.
My entire staff and it would be fabulous for all districts to have a link to this film on their websites.
Educators and parents.
My school district.
Teacher/parents in places without current inclusiveness/gender curriculum.
I would purchase a copy to share with my staff and at district administration meetings.
I would recommend this film to any parents that are unsure about how to teach children about the spectrum or are unsure how to feel about it themselves.
School principal. Maybe to a school or district that is unaware of the benefits of training.
Friends with growing children. To educate.
Yes to every school!
Yes, to teachers/youth workers/parents who are beginning to learn to support gender-variant youth.
To admin/schools and teachers.
Schools, teachers, parents, groups.
Parents of elementary school kids who are unfamiliar with these concepts. It is a good place to start a discussion.
Good training pre and post training video.
K12 educators. This is sorely lacking in our curriculum.
My school staff (where I teach!)
To all my teacher friends, my children, my staff, PTA, teaching education programs, XXXXX, XXXX, XXXX XXXXXX University.

Let the kids be the teachers. The following participant answers have been selected from the survey to demonstrate the trend in answers to the space allowed at the end of the survey for “other thoughts” and “what was your favorite part?”

The students continually teach me and remind me that they are more open minded than we think.
Seeing how excited the kids were to talk about it! They want to!
The kids are amazing teachers!
Kids voices - we don't get to listen enough to what kids say.
The kids[sic] interviews were beautiful - if we could just let them teach us - it would be perfect.
I loved the child's perspectives, that's such a hey to this transition of where schools/parents need to get to.
The children's excitement and involvement in learning something knew and talking openly about it.
The 5th grade students identifying their personal biology, identity, and expression.
Student testimonials.
The young people describing their own expressions with gender mapping, sharing the lessons.
The narratives of the youth and the view into the tracing at each grade level - an important movie for educators to see.
The children open people's hearts.
The students because they continually teach me and remind me that they are more open minded than we think.
My favorite part of the film was seeing the level of confidence kids exhibited as they talked about their genders.
Listening to the kids and their thinking.
The kids' insight a clarity gives you so much hope for this kind of work working. 4th graders were awesome.
The kids are amazing teachers!
The student interviews were the most powerful. It was great to see the continuum from k-5th grade.
Interviewing the kids because they always have such good ideas about things.
The children and what they had to say because they're insightful, pure, honest, and fun.
Seeing the children's perspectives was valuable. Their POVs [points of views] are often neglected.
Kids voices - we don't get to listen enough to what kids say.

Gender inclusivity in schools is doable. The following participant answers have been selected from the survey to demonstrate the trend in answers to the space allowed at the end of the survey for “other comments.”

It is really not as hard as people might think.
It can be done with education. It’s not as overwhelming as it seems.
I couldn’t really picture how to do it. Seeing this makes me feel hopeful like can we try to do this everywhere?
It’s do-able. It’s not rocket science.
I couldn’t really picture how to do it. Seeing this makes me feel hopeful like can we try to do this everywhere?
Not that hard, afterall.
It feels doable!
It is not as hard as people think.
Where there’s a will, there’s a way.

Challenging to incorporate into education. The following participant answers have been selected from the survey to demonstrate the trend in answers to the space allowed under “Critiques” and at the end of the survey for “Other Comments.”

Clearly, it is an ongoing process that takes a lot of work. Understood it takes effort on all fronts!
[The challenge of] training teachers whom [sic] had no skills in gender differentiating.
Lots of XXXX schools are doing this but have hit the very big roadblock of gender identity.
Watching the teachers navigate how to have this discussion because many think its[sic] too hard to talk about.
Teachers crying send students freely discussing.
My experience with schools has been a lack of interest to request education. Even resentment of having to deal with the issue.
It [gender expansive education] is possible, but probably not realistic.

Dr. Steven Seth Funk lectures in Writing, and Gender and Media Studies at Montana State University, Billings (MSUB) and guest lectures on gender in higher education at the University of Southern California (USC). Addressing issues of microaggressions in education and trans*+ media representation, his work has been published in books by IGI Global and Praeger, as well as in journals such as *Series* and *Sexuality & Culture*. He and Dr. Jaydi Funk are currently conducting a large-scale, interdisciplinary, mixed methods study at: <https://goo.gl/forms/cUMFUqos09chHCd32>.

Dr. Jaydi Funk is a pharmacist at a long-term healthcare facility and guest lectures on the pharmacological implications of gender-based dosing at the University of Southern California (USC) and the Gender Spectrum Annual Professionals' Symposium. Her published work has explored pediatric dosing and gender-based medicine. She and Dr. Steven Seth Funk are currently conducting a large-scale, interdisciplinary, mixed methods study at: <https://goo.gl/forms/cUMFUqos09chHCd32>.